Please type a plus sign (+) inside this box →

required)

PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032

Not yet assigned

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN				Attorn y Docket Numb r	27023/04037			
				First Named Inventor	Wen-Qing (Peter) Xu et al.			
PATENT APPLICATION (37 CFR 1.63)				COMPLETE IF KNOWN				
			00)	Application Number	Not yet assigned			
Declaration Submitted OR with Initial		Declaration Submitted after Initial	Filing Date	Herewith				
	0.1		Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit	Not yet assigned			
Filing								

**Examiner Name** 

As a below named inventors, we hereby declare that:									
Our residence, post office address, and citizenship are as stated below next to our names.									
We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
CMP SLURRY									
the specification of which		(Title of the Invention)							
is attached hereto									
OR was filed on (MM/DD/YYY	m	as United States Applic	ation Number						
		ed on (MM/DD/YYYY)		(if applicable)	).				
We hereby state that we have reamended by any amendment spe			lentified specification, incl	uding the claims,	as				
We acknowledge the duty to disc	lose information which is	material to patentability as	defined in 37 CFR 1.56.						
We hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	y Attached? NO				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under	35 U.S.C. 119(e) of any U	nited States provisional ap	oplication(s) listed below.						
Application Number(s)	Filing Date	(MM/DD/YYYY)	numbers are li supplemental	visional application isted on a priority data shee attached hereto.					
}									

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (12-97) Approved for use through 9/30/00. OMB 0651-0032 Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

U.S. Parent Application or PCT International filing date of this application.  U.S. Parent Application or PCT Parent Number  U.S. Parent Application or PCT Parent Number    Parent Filing Date (MM/DD/YYYY)	United State United State	s of Amer s or PCT I	rica, listed below international appli- naterial to natenta	and, insofar cation in the	as the manner	subject m provided	atter of each by the first p	of the claim aragraph of 3	s of this 5 U.S.C.	application 112, I acknow	is not disclose owledge the di	ed in the prior
Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SBI02B attached hereto.  As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Place Customer Number on Registration Place Customer Number on Registration number listed below.  Registration Name Registration Number on Number on Number on Number on Number Nu												
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:    Customer Number   Customer Numb							ļ	(if	applicable)			
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Place Customer and Trademark Office connected therewith:    Customer Number												
and Trademark Office connected therewith:    Customer Number	☐ Addition	al U.S. or	PCT International	application n	umbers	are listed	on a supple	mental priority	data she	et PTO/SB/	02B attached h	ereto.
and Trademark Office connected therewith:	As a named	inventor, I	hereby appoint th	e following re	egistere	d practition	ner(s) to pros	secute this ap	plication a	and to transa	act all business	in the Patent
Registration Name  Registration Number  S. Paige Christopher S. Paige Salazs S. 47,401 S. Additional registered practitioner information sheet PTO/SB/02C attached hereto.  Direct all correspondence to: Select Salazine Number or Bar Code Label S. Calfee, Halter & Griswold LLP Address S. Calfee, Halter & Griswold LLP Address S. So. Superior Avenue — Suite 1400 City Cleveland S. State S. Ohio Zip 44114-2688 Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  Signatur  Seven Name (first and middle [if any])  Family Name or Sumame  Wen-Qing (Peter)  State MA Country USA Citizenship USA  Country USA  Citizenship USA  Post Office Address  220 Hudson Street  City Northborough  Northborough  State MA Zip 01532  Country USA	and Tradema	ark Office	connected therewi			Number	Number Bar Code					
Name   Number   Numb				<b>-7</b>		l practition	er(s) name/r	egistration nu	mber liste	ed below		
S. Paige Christopher Kristin J. Frost 50,627 Pamela A. Docherty 40,591  Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to: Customer Number or Bar Code Label  Name John E. Miller  Address Calfee, Halter & Griswold LLP  Address 800 Superior Avenue – Suite 1400  City Cleveland Stale Ohio ZIP 44114-2688  Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816  I hereby declare that all statements made herein of my own knowledge are true and that all statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor: Apetition has been filed for this unsigned inventor  Given Name (first and middle [if any]) Family Name or Sumame  Wen-Qing (Peter) Xu  Inventor's Signatur Apetition has been filed for this unsigned inventor  Residence: City Northborough State MA Country USA Citizenship USA  City Northborough State MA ZIP 01532 Country USA  Country USA				Reg	gistratio	on	1	ogioa da ori 110	111551 11510	od Dolow.		
Kristin J. Frost 50,627 Pamela A. Docherty 40,591  Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to:				· · · · · · · · · · · · · · · · · · ·	lumber							ımber
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.  Direct all correspondence to:	•	•	ner	,								
Direct all correspondence to:	Kristin J. F	rost		50,627			Pamela	A. Docher	ty	40,591		
Name John E. Miller  Address Calfee, Halter & Griswold LLP  Address 800 Superior Avenue — Suite 1400  City Cleveland State Ohio ZIP 44114-2688  Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor: A petition has been filed for this unsigned inventor  Given Name (first and middle [if any]) Family Name or Surname  Wen-Qing (Peter) Xu  Inventor's Signatur Date  Residence: City Northborough State MA Country USA Citizenship USA  Post Office Address 220 Hudson Street  City Northborough State MA ZIP 01532 Country USA	Addition	al register	ed practitioner(s)	named on su	ppleme	ntal Regist	ered Practiti	oner Informati	on sheet	PTO/SB/02	C attached her	eto.
Address   800 Superior Avenue - Suite 1400   City   Cleveland   State   Ohio   ZIP   44114-2688   Country   U.S.A.   Telephone   (216) 622-8679   Fax   (216) 241-0816   I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:   A petition has been filed for this unsigned inventor  Given Name (first and middle [if any])   Family Name or Surname    Wen-Qing (Peter)   Xu    Inventor's Signatur   Wen-Qing (Peter)   Xu    Residence: City   Northborough   State   MA   Country   USA   Citizenship   USA    Post Office Address   220 Hudson Street    City   Northborough   State   MA   Zip   01532   Country   USA    Country   USA   Country   USA    Country	Direct all cor	responden			- 1			OR	$\square$	Correspon	dence address	s below
Address 800 Superior Avenue – Suite 1400  City Cleveland State Ohio ZIP 44114-2688  Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor: A petition has been filed for this unsigned inventor  Given Name (first and middle [if any]) Family Name or Sumame  Wen-Qing (Peter) Xu  Inventor's Signatur  Residence: City Northborough State MA Country USA Citizenship USA  Post Office Address  220 Hudson Street  City Northborough State MA ZIP 01532 Country USA	Name	John E	. Miller									
Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  Given Name (first and middle [if any])  Wen-Qing (Peter)  Wen-Qing (Peter)  State  MA  Country  USA  Citizenship  USA  Post Office Address  220 Hudson Street  City  Northborough  State  MA  ZIP  01532  Country  USA	Address	Calfee,	Halter & Grisv	wold LLP								
Country U.S.A. Telephone (216) 622-8679 Fax (216) 241-0816  I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  Given Name (first and middle [if any])  Wen-Qing (Peter)  Wen-Qing (Peter)  State MA Country USA Citizenship USA  Post Office Address  Post Office Address  220 Hudson Street  City Northborough State MA ZIP 01532 Country USA	Address	800 Su	perior Avenue	- Suite 14	100							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  Given Name (first and middle [if any])  Wen-Qing (Peter)  Residence: City  Northborough  State  MA  Country  USA  Citizenship  USA  Post Office Address  Post Office Address  220 Hudson Street  City  Northborough  State  MA  ZIP  01532  Country  USA	City	Clevela	and			State	Ohio	Ohio ZIP			44114-2	688
believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  Given Name (first and middle [if any])  Wen-Qing (Peter)  Residence: City Northborough  State MA  Country USA  Citizenship USA  Post Office Address  220 Hudson Street  City Northborough  State MA  ZIP 01532  Country USA	Country	U.S.A.			Telepho	phone (216) 622-8679				Fax	(216) 24	1-0816
Given Name (first and middle [if any])  Wen-Qing (Peter)  Xu  Inventor's Signatur  Residence: City Northborough  Post Office Address  Post Office Address  City Northborough  State MA  ZIP 01532  Country USA	believed to be punishable b	e true; an y fine or	id further that the imprisonment, or	ese statemen both, under	its were	made wi	th the know	ledge that wi	illful false	statements	and the like	so made are
Wen-Qing (Peter)  Inventor's Signatur  Residence: City Northborough State MA Country USA Citizenship USA  Post Office Address  Post Office Address  City Northborough State MA ZIP 01532 Country USA	Name of	Sole or i	First Inventor	:	<del>-</del>			☐ A petiti	ion has b	een filed for	this unsigned i	nventor
Inventor's Signatur  Residence: City Northborough State MA Country USA Citizenship USA  Post Office Address  Post Office Address  City Northborough State MA ZIP 01532 Country USA		Given	Name (first and r	niddle [if any]	)				Family N	ame or Surr	name	
Residence: City Northborough State MA Country USA Citizenship USA  Post Office Address Post Office Address City Northborough State MA ZIP 01532 Country USA			Wen-Qing (P	eter)					·	Xu		
Post Office Address  Post Office Address  City Northborough State MA ZIP 01532 Country USA							1					
Address  Post Office Address  220 Hudson Street  City Northborough State MA ZIP 01532 Country USA	Residence: City Northborough				State	MA	Country	USA		Citizenship	USA	
Post Office Address 220 Hudson Street  City Northborough State MA ZIP 01532 Country USA											-3:	
City Northborough State MA ZIP 01532 Country USA	Post Office		220 Hudson	Street								
						State	MA	ZIP	01532	2	Country	USA
		al inventor			ppleme	ntal Additi	onal Inventor	(s) sheet(s) P	TO/SB/0	2A attached		

P10/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

### **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Pag 1 of 1

Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])			Family Name or Surname						
	<u>-</u>	Hegde							
Inventor's Signature						Date			
Residence: City		State		Country			Citizenship	India	
Post Office Address									
Post Office Address									
City		State	<u> </u>	ZIP			Country		
Name of Additiona	al Joint Inventor, i	f any:		A petition has been filed for this unsigned inventor					
Given	Name (first and middle	[if any])				Family Na	me or Surnam	e	
			,						
Inventor's Signatur							Date		
Residence: City		State		Country			Citizenship		
Post Office Address									
Post Office Address									
City		State		ZIP			Country		
Name of Additiona	al Joint Inventor, i	f any:		A petition has been filed for this unsigned inventor					
Given	Name (first and middle	[if any])		Family Name or Surname					
Inventor's Signature							Date	,	
Residence: City		State		Country			Citizenship		
Post Office Address									
Post Office Address									
City		State		ZIP			Country		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

valid OMB control number.

Approved for use through 9/30/98. OMB 0651-0032 Please type a plus sign (+) inside this box → Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a

### **DECLARATION**

#### REGISTERED PRACTITIONER **INFORMATION** (Supplemental Sheet)

Nam	Registration Number	Name	Registration Number
Mary E. Golrick	34,829	Charles B. Lyon	25,739
George R. Hoskins	46,780	John E. Miller	26,206
Brian D. Johnson	38,520	Nenad Pejic	37,415
Jeanne E. Longmuir	25,519	June E. Rickey	40,144
Sean T. Moorhead	38,564	William E. Zitelli	28,551
John T. Wiedemann	28,920	Douglas B. McKnight	50,447
Tara A. Kastelic	35,980		·
Leonard L. Lewis	31,176		
50			
	16		
	11		
	1	MA	
			7

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.